

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
<b>CLAIMS</b>								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/						51	
2	/						52	
3		/					53	
4		2					54	
5		2					55	
6		/					56	
7		/					57	
8	/						58	
9		/					59	
10		/					60	
11		/					61	
12	/						62	
13		/					63	
14		/					64	
15	/						65	
16		1					66	
17		1					67	
18		2					68	
19		1					69	
20		1					70	
21		1					71	
22							72	
23							73	
24							74	
25							75	
26							76	
27							77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	5	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	49	←		←		←	TOTAL DEP.	←
TOTAL CLAIMS	24						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS